# Patient & Family Guide

### Delirium After Cardiac Surgery



### **Delirium After Cardiac Surgery**

Delirium is common after cardiac surgery. This can be stressful for you and your support persons. This pamphlet will help you and your support persons learn more about delirium after cardiac surgery.

#### What is delirium?

- Delirium is a medical condition that causes short-term problems with thinking and understanding.
- Symptoms of delirium often start suddenly. They can come and go quickly.
- People with delirium may:
  - › Be less able to focus or pay attention
  - > Be confused
  - Be very sleepy or drowsy. Some people may be both drowsy and agitated (upset) over 1 or 2 days
  - Be very agitated
  - See or pick at things that are not there
- There is often an underlying cause for dementia, like an illness or other reason.

#### Is delirium the same as dementia?

- No, delirium is not the same as dementia.
   Delirium happens suddenly, while dementia happens more slowly, over time.
- People with dementia have a higher risk of developing delirium when they are sick.

#### Is delirium the same as mental illness?

 No, delirium is not the same as mental illness, but some symptoms may be similar.

### What are the symptoms?

- Confused thinking or actions
- > Trouble concentrating and focusing attention
- Feeling upset or anxious
- Not trusting others
- Not knowing the right time and place
- Not understanding what they see or hear around them
- Hallucinate (hear or see things that are not real)
- Being more restless and irritated, or being more quiet than usual
- > Slow or slurred speech
- Trouble writing
- > Problems with short and long-term memory

- A person with delirium may have some or all of these symptoms.
- · Symptoms are often worse at night.

# What can cause delirium after cardiac surgery?

- General anesthetic (medication to put you to sleep during surgery)
- Complications from surgery and/or a cardiopulmonary bypass
- Low oxygen levels
- > The stress of having surgery
- Infection, like a bladder or a lung infection
- Chronic (ongoing) health problems (like heart failure or obstructive lung disease) that are getting worse
- Severe (very bad) illness, like dehydration (not having enough fluid in your body), or diabetes that is not being managed
- > The effects of some medications
- Taking many medications
- Suddenly stopping certain drugs, alcohol, or tobacco

# Who is at risk of delirium after cardiac surgery?

- You are at a higher risk of delirium after surgery if you:
  - Have poor nutrition
  - Do not get enough sleep
  - Have depression
  - Have pain that is not being managed
  - Have a urinary catheter

- Have a family history of delirium
- Are an older adult
- Have had delirium before
- › Have dementia

# What can make delirium worse while in the hospital?

- Using physical restraints (like belts, mitts, or bed rails)
- Limiting the person's movement or long periods of bedrest
- > Dehydration
- > Poor nutrition
- > Pain
- A urinary catheter
- Eyesight or hearing that is getting worse

- Having a hard time going to the bathroom
- Not getting enough sleep. This is more common in units that have a lot of lights and alarms, like the Intensive Care Unit (ICU) and the Intermediate Care Unit (IMCU).
- Moving to a place that is not familiar

### Treatment and recovery

- Doctors and nurses will assess you to try and find the underlying cause. This will include some tests.
- The goal is to keep you and others safe from harm.
- You may get medication to help your symptoms.
- At times, you may also need to have physical restraints. The health care team will talk with you about this if it is needed.
  - Having a support person with you in the hospital can help. If a support person is not available, staff may sit with you to help keep you safe.
- Often, people with delirium will be less confused and able to think more clearly as they recover at home.
- It may take days to months for symptoms of delirium to go away completely.

If you have questions, please talk to a member of the health care team.

### What can support persons do to help?

- Help create a calming environment.
  - Offer them comfort and support.
  - Bring familiar items from home, like a family photo, a calendar, or other personal items to decorate their room.

- Take care not to over-excite them.
- Monitor their caffeine intake.
- Play soothing music.
- Put a calendar or a clock where they can see it.
- Let them rest without being interrupted.
- Keep normal day and night light patterns.
- When talking to them, talk slowly and clearly.
  - Use simple words and talk about familiar topics. For example, talk about their family or friends.
  - Do not argue or tell them they are wrong.
  - Do not quiz, test, or challenge them.
- Encourage them to eat and drink enough.
- Make sure they are wearing their hearing aids and glasses, if needed.
- Encourage them to be up and about when it is safe to do so.
- Help them get to the bathroom when needed.
   Tell a member of the health care team if you need help with this.
- Tell a member of the health care team if:
  - they are very restless.
  - you think they are in pain.
  - you see any change in their behaviour.

Notes:			

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

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